

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.B	JC 895	02-22-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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15	✓
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18	✓
19	✓
20	0
21	0
22	✓
23	✓
24	✓
25	✓
26	✓
27	0
28	0
29	✓
30	✓
31	✓
32	✓
33	✓
34	0
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36	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	0
49	0
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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